

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	10-11-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	SA	65566 1/4	11-4-01

INDEX OF CLAIMS

..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	10-11-01
2	10-11-01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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